## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**CLAIMS AS FILED - PART I** 

Application or Docket Number

SMALL ENTITY

1242/49/2

**OTHER THAN** 

|  |  |   | (Column 1)        |                              | (Column 2)                   |                  | TY       | TYPE 🔀            |                        | OR      | OR SMALL ENTITY     |                        |  |
|--|--|---|-------------------|------------------------------|------------------------------|------------------|----------|-------------------|------------------------|---------|---------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 99                |                              |                              |                  |          | RATE              | FEE                    |         | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED      |                              | NUMBER EXTRA                 |                  | В        | ASIC FEE          | 370.00                 | OR      | BASIC FEE           | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 99 minus 20=      |                              | * 79                         |                  |          | X\$ 9=            | 711                    | OR      | X\$18=              |                        |  |
| INDEPENDENT CLAIMS   |  |   | 12 minus 3 =      |                              | * (                          | 9                | Γ        | X42=              | 378                    | OR      | X84=                |                        |  |
| MULTIPLE DEPENDENT CLAIM PR  |  |   | RESENT            |                              |                              |                  |          | +140=             |                        | OR      | +280=               |                        |  |
| * If   | the difference                                       | in column 1 is                            | less than ze      | ro, ente                     | r "0" in c                   | olumn 2          | L.       | TOTAL             | 1459                   | OR      | TOTAL               |                        |  |
|  | C  | I AIMS AS A                               | MENDED - PART II  |                              |                              |                  | •        |                   | •                      | OTHER   | THAN                |                        |  |
|  |  | (Column 1)                                | (Column 2         |                              |                              | (Column 3)       |          | SMALL E           | ENTITY                 | OR      | SMALL               |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | HIGH<br>NUM<br>PREVI<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus             | **                           |                              | =                |          | X\$ 9=            |                        | OR      | X\$18=              |                        |  |
|  | Independent  | *   | Minus             | ***                          | T OL A144                    | =                |          | X42=              |                        | OR      | X84=                |                        |  |
| L  | FIRST PRESE  | NTATION OF M                              | OLTIPLE DEF       | PENDEN                       | CLAIM                        |                  | '        | +140=.            |                        | OR      | +280=               |                        |  |
|  |  |   |                   |                              |                              |                  | L        | TOTAL             |                        |         | TOTAL               |                        |  |
|  |  |   |                   |                              |                              |                  | AD       | DIT. FEE          |                        | OR      | ADDIT. FEE          | -                      |  |
|  |  | (Column 1)                                |                   | (Colu                        | mn 2)                        | (Column 3)       |          |                   |                        |         |                     |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | NUM<br>PREVI                 | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus             | **                           | FOR                          | =                |          | X\$ 9=            | ree .                  | OR      | X\$18=              |                        |  |
|  | Independent  | *   | Minus             | ***                          |                              | =                | 1  -     | X42=              |                        |         | X84=                |                        |  |
|  | FIRST PRESENTATION OF MI                             |   | JLTIPLE DEPENDENT |                              | CLAIM                        | И                |          | 7,42-             |                        | OR      | 7.01-               |                        |  |
|  |  |   | · .               |                              |                              |                  | <b>.</b> | +140=             |                        | OR      | +280=               |                        |  |
|  |  |   |                   |                              |                              |                  | AD       | TOTAL<br>DIT. FEE |                        | OR      | TOTAL<br>ADDIT. FEE |                        |  |
|  |  | (Column 1)                                |                   |                              | mn 2)<br>HEST                | (Column 3)       |          |                   |                        |         |                     |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                   | NUM<br>PREVI                 | BER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus             | **                           | *                            | =                |          | X\$ 9=            |                        | OR      | X\$18=              |                        |  |
|  | Independent  | *   | Minus             | ***                          | T.O. A.144                   | =                |          | X42=              |                        | OR      | X84=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= |   |                   |                              |                              |                  |          |                   |                        | OR      | +280=               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT FEE  |  |   |                   |                              |                              |                  |          |                   |                        | OB      | TOTAL               |                        |  |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box |  |   |                   |                              |                              |                  |          |                   |                        |         | ADDIT. FEE          |                        |  |
|  | ine "Highest Num                                     | iber Previously Pa                        | io For (lotal o   | ınaepena                     | ient) is the                 | nignest numbe    | er round | ın me app         | ropnate box            | k in co | iuiTITI T.          |                        |  |